



Name of Person Filing

JAMES E. ANKER

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

B. Name and address of Business (including trade name, if any).

Name DH EVANS

Trade Name, if any: \_\_\_\_\_

P.O. Box, Bldg., Room No., if any \_\_\_\_\_

Street 2207 FOREST HILLS DRIVECity HARRISBURGState PA ZIP Code + 4 17112-0988

B. Business deals with:

- a. Labor Organization  
 b. Trust  
 c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name IBEW LOCAL 812 H&W FUND

+ ANNUITY FUND

Trade Name, if any: \_\_\_\_\_

P.O. Box, Bldg., Room No., if any \_\_\_\_\_

Street 500 JORDAN AVENUECity MONTICELLOVILLEState PA ZIP Code + 4 17154-2324

11.a. Nature of such dealing.

REQUIRED TRAINING THROUGH IFCBP  
 AND LUNCHES FOR  
 QUARTERLY TRUSTEE MEETINGS

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

H&W - 3,435.93  
 ANNUITY - 2,194.00

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name \_\_\_\_\_

Trade Name, if any: \_\_\_\_\_

P.O. Box, Bldg., Room No., if any \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP Code + 4 \_\_\_\_\_

14.a. Nature of payment.

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.